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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number 3800.01
		First Named Inventor John IRVING
		COMPLETE IF KNOWN
		Application Number
		Filing Date July 12, 2002
<input checked="" type="checkbox"/> Declaration Submitted With Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)		Art Unit
		Examiner Name

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD AND SYSTEM FOR SECURE COMMUNITY
PROFILE GENERATION AND ACCESS VIA A
COMMUNICATION SYSTEM**

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT InternationalApplication Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Numbers)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

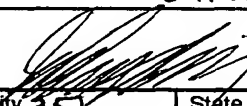
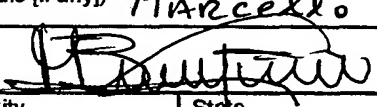
[Page 1 of 2]

This collection of information is required by 37 CFR 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number or Bar Code Label		OR <input type="checkbox"/> Correspondence address below	
Name James D. Fornari, Esq			
Address 645 MADISON AVENUE - 13th FLOOR			
City New York	State New York	ZIP 10022	
Country USA	Telephone 212-698-0567	Fax 212-698-0573	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) John		Family Name or Surname IRVING	
Inventor's Signature 		Date June 19, 2003	
Residence: City 352 DALY STREET OTTAWA	State ONT	Country CANADA	Citizenship CANADIAN
Mailing Address 352 DALY STREET			
City OTTAWA	State ONT	ZIP K1N 6G9	Country CANADA
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Marcello		Family Name or Surname BURSZEIN	
Inventor's Signature 		Date JUNE 19, 2003	
Residence: City OTTAWA	State ONT	Country CANADA	Citizenship ARGENTINEAN
Mailing Address 335 COOPER STREET - APT 23			
City OTTAWA	State ONT	ZIP K2P 0G6	Country CANADA
<input type="checkbox"/> Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
Page <u>2</u> of <u>2</u>	

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
STEVE		MULLIGAN	
Inventor's Signature <i>Steve Mulligan</i>		Date <i>June 19/2003</i>	
Residence: City	OTTOWA	State	ONT
		Country	CANADA
Citizenship <i>CANADIAN</i>			
Mailing Address <i>125 STEWART STREET -APT 404</i>			
Mailing Address			
City	OTTOWA	State	ONT
		Zip	K1N 6J3
		Country	CANADA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
PATRICIE		LAJEUNESSE	
Inventor's Signature <i>Pat Lajeunesse</i>		Date <i>June 19/2003</i>	
Residence: City	OTTOWA	State	ONT
		Country	CANADA
Citizenship <i>CANADIAN</i>			
Mailing Address <i>35 LANGEVIN AVENUE</i>			
Mailing Address			
City	OTTOWA	State	ONT
		Zip	K1M 1G1
		Country	CANADA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Citizenship			
Mailing Address			
Mailing Address			
City		State	
		Zip	
		Country	

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	
Filing Date	
First Named Inventor	John IRVING
Title	
Art Unit	
Examiner Name	
Attorney Docket Number	

I hereby appoint:

☐ Practitioners at Customer Number

OR

☒ Practitioner(s) named below:Place Customer
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Name	Registration Number
JAMES D. FORNARI	25,260

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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☐ The above-mentioned Customer Number.

OR

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OR

<input checked="" type="checkbox"/> Firm or Individual Name	JAMES D. FORNARI				
Address	645 MADISON AVENUE - 13 th FLOOR				
Address					
City	NEW YORK	State	NY	Zip	10022
Country	USA				
Telephone	212-698-0567	Fax	212-698-0573		

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**

Name	John IRVING		
Signature	<i>[Signature]</i>		
Date	2003	Telephone	1-888-770-3333

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 4 forms are submitted.

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First Named Inventor	John IRVING
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Attorney Docket Number	

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State

NY

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Country

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Telephone

212-698-0567

Fax

212-698-0573

I am the:



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Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

MARCELLO BURSZEIN

Signature



Date

JUNE 19, 2003

Telephone

1-888-770-3333

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Filing Date

First Named Inventor

John IRVING

Title

Art Unit

Examiner Name

Attorney Docket Number

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SIGNATURE of Applicant or Assignee of Record

Name	STEVE MULLIGAN		
Signature	Steve Mulligan		
Date	June 14/2003	Telephone	1-888-770-3333

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Application Number

Filing Date

First Named Inventor

Title

Art Unit

Examiner Name

Attorney Docket Number

John IRVING

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City

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JAMES D. FORNARI

645 MADISON AVENUE - 13th FLOOR

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**

Name

Signature

Date

PATRICK LAJEUNESSE

Pat [Signature]

June 09/2003

Telephone

1-888-770-3333

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